PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

annmonmale. All burther	correspondence including the contract of the c	to the	Patent advance or	rders and notification	of n	isintengura tere u	zill he n	nailed to the current	hould be completed where correspondence address as trate "FEE ADDRESS" for		
CURRENT CORRESPONDE	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
30686	7590 07/26	/2006									
SCHLUMBERGER K.K.						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
2-2-1 FUCHINOBE SAGAMIHARA-SHI, KANAOAWA-KEN, 229-0006											
		trans	mitted to the USP	TO (571)) 273-2885, on the d	ate indicated below,					
JAPAN		Se	tsuko Kawashir	ma		(Depositor's name)					
		\vdash		···		(Signature)					
				•	ᆫ				(Date)		
APPLICATION NO.	FILING DATE	FILING DATE		FIRST NAMED INVEN		R ATTOR		NEY DOCKET NO.	CONFIRMATION NO.		
10/675,053	09/30/2003			Kenichiro Miyamo	o Miyamoto		26.0239 US		5853		
TITLE OF INVENTION: MULTI-POLE TRANSMITTER SOURCE											
ABBLAT WARD	OMALIA PARTITU	100	orm non min	THE LOW THOM PUTE	VIE I	PREV. PAID ISSUE	2000	TOTAL PERIOD DATE	DAME DIM		
APPLN. TYPE	SMALL ENTITY	151	SUE FEE DUE	PUBLICATION FEE D	!		3848	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	al NO		\$1400	\$300		\$0		\$1700	10/26/2006		
EXAMINER		ART UNIT		CLASS-SUBCLASS	5						
TSAY, FRANK		3672		175-0500 0 0							
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363). Karan Singh									ah		
CFR 1.363).	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					gn					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(2) the name of a single firm (having as a member a 2 William Batzer					atzer		
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney 2 registered patent listed, no name wil	or a attor	gent) and the name neys or agents. If r	nes of up to f no name is 3 Dale Gaudier				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	тов	E PRINTED ON T	HE PATENT (print o	r tvp	e)					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE; Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for											
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
Schlumberger Technology Corporation Sugar Land, Texas											
Please check the appropri	ate assignee category or	catego	ries (will not be pr	inted on the patent);		Individual 🛮 Co	rporatio	n or other private gro	up entity Government		
4a. The following fee(s) a	re submitted:		4 b	. Payment of Fee(s): (Pleas	se first reapply an	y previo	usly paid issue fee :	shown above)		
☑ Issue Fee ☐ A check is enclosed.											
☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card, Form PTO-2038 is attached. ☐ Advance Order - # of Copies ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any											
Advance Order - #	of Copies			∠ The Director is he overpayment, to I	reby Depos	authorized to charg it Account Numbe	ge the re r 50-112	quired fee(s), any de 2 (enclose au	ficiency, or credit any n extra copy of this form).		
5. Change in Entity Stat	us (from status indicated			☐ b. Applicant is no					R 1.27(g)(2).		
									e assignee or other party in		
interest as shown by the re	econds of the United Sta	espate	ent and Trademark	Office.		0	1 N				
Authorized Signature	MOMMAN	M	Man	<u></u>		Date <u> </u>	المل	ser 6,	2006		
Typed or printed name Karan Singh				Registration No. 38,698							
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	tion is required by 37 C fality is governed by 35 application form to the ons for reducing this bur reginia 22313-1450. DO 3-1450.	FR 1.3 U.S.C. USPTO den, sh NOT	11. The information 122 and 37 CFR 0. Time will vary ould be sent to the SEND FEES OR C	n is required to obtain 1.14. This collection i depending upon the i chief Information O COMPLETED FORM	or re s esti indivi officer S TO	tain a benefit by the mated to take 12 m dual case. Any con , U.S. Patent and 7 THIS ADDRESS.	ie publication publication in inities to ini	which is to file (and o complete, includin on the amount of tir rk Office, U.S. Depa TO: Commissioner i	by the USPTO to process) g gathering, preparing, and ne you require to complete utment of Commerce, P.O. or Patents, P.O. Box 1450,		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.